

PTO/SB/22 (8-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

MOBT 189 DIV

#14/f

11-18-02

In re Application of  
Jawed Asrar and Jean R. Pierre

Application Number 09/714,469

Filed 11/16/2000

For Polymer blends Containing Polyhydroxyalkanoates and  
Compositions with Good Retention of Elongation

Group Art Unit 1714

Examiner  
T. H. Yoon

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ \_\_\_\_\_
- ☒ Two months (37 CFR 1.17(a)(2)) \$ 400.00
- ☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_
- ☐ Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_
- ☐ Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 200.00.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1868.

I have enclosed a duplicate copy of this sheet.

I am the ☐ assignee of record of the entire interest.

☐ applicant.

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

☐ number if acting under 37 CFR 1.34(a) \_\_\_\_\_

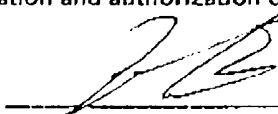
11/20/2002 YHDDLET 00000001 501868 09/714,469

C:2252

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November 14, 2002

Date



Signature

Zhaoyang Li

Typed or printed name

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PTO/SB/21 (08-00)

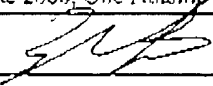
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/714,469	
	<b>Filing Date</b>	11/16/2000	
	<b>First Named Inventor</b>	Jawed Asrar and Jean R. Pierce	
	<b>Group Art Unit</b>	1714	
	<b>Examiner Name</b>	T. H. Yoon	
<b>Total Number of Pages in This Submission</b>	7	<b>Attorney Docket Number</b>	MOBT 189 DIV

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation/Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Transmittal
Remarks: <span style="float: right;">           RECEIVED            NOV 18 2002            GROUP 1700         </span>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Zhaoyang Li, Reg. No. 46,872 Holland & Knight LLP Suite 2000, One Atlantic Center, 1201 West Peachtree Street, N.E.; Atlanta, GA 30309-3400
Signature	
Date	November 14, 2002

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# HOLLAND & KNIGHT LLP

One Atlantic Center  
1201 West Peachtree Street, N.E.  
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Atlanta, Georgia 30309-3400

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FAX 404-881-0470  
http://www.hkdlaw.com

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## MESSAGE:

Applicants: Jawed Asrar and Jean R. Pierre

Serial No.: 09/714,469

Art Unit: 1714

Filed: November 16, 2000

Examiner: T. H. Yoon

For: **POLYMER BLENDS CONTAINING POLYHYDROXYALKANOATES AND COMPOSITIONS WITH GOOD RETENTION OF ELONGATION**

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NOV 14 2002  
G. YOUNG

PTO/SB/17 (11-01)

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**FEE TRANSMITTAL**  
**for FY 2002**

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

**Complete if Known**

Application Number	09/714,469
Filing Date	November 16, 2000
First Named Inventor	Jawed Asrar and Jean R. Pierre
Examiner Name	T. H. Yoon
Group Art Unit	1714
Attorney Docket No.	MOBT 189 DIV

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit Account Number	50-1868
Deposit Account Name	Holland & Knight LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☒ Charge fee(s) indicated below, except for the filing fee to the aboveidentified deposit account.
**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent Claims	8	- 20		X			
Multiple Dependent Claims	4	- 3		X			

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$ 0.00)

\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES****Large Entity Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	200.00
118	400	218	200	Extension for reply within second month	
117	220	217	110	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,980	228	990	Extension for reply within fifth month	160.00
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
145	740	245	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
189	900	189	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 360.00)

**SUBMITTED BY**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Registration No. \_\_\_\_\_

16,870

**Complete if applicable**

Telephone 101 817 2531

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